

In re Application of:

KATSUHIKO HARA

Application No.: 09/749,731

Filed: December 28, 2000

For: IMAGE PROCESSING
APPARATUS AND METHOD

Mail Stop Amendment
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 14	MINUS	** 20	= 0	x \$25 \$50	0
INDEP. CLAIMS	* 3	MINUS	*** 3	= 0	x \$100 \$200	0
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

I hereby certify that this correspondence is being
deposited with the United States Postal Service as first-
class mail in an envelope addressed to: Commissioner
for Patents, P.O. Box 1450, Alexandria, VA 22313-
1450 on March 2, 2005

(Date of Deposit)

Carol A. Quinn, Reg. No. 39,000

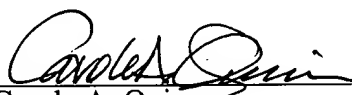
(Name of Attorney for Applicant)

Carol A. Quinn
Signature

March 2, 2005
Date of Signature

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

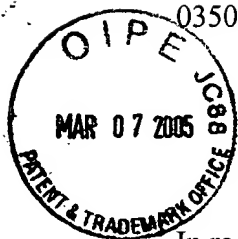

Carole A. Quinn
Attorney for Applicant
Registration No.: 39,000

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200

2624 ^{ITW}

03500.015028.

PATENT APPLICATION



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: Kyle M. Pendergrass
KATSUHIKO HARA)	
	:	Group Art Unit: 2624
Application No.: 09/749,731)	
	:	
Filed: December 28, 2000)	
	:	
For: IMAGE PROCESSING)	
APPARATUS AND METHOD	:	March 2, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated December 2, 2004, please amend the
above-identified application, as follows:

I hereby certify that this correspondence is being
deposited with the United States Postal Service as first-
class mail in an envelope addressed to: Commissioner
for Patents, P.O. Box 1450, Alexandria, VA 22313-
1450 on

March 2, 2005

(Date of Deposit)

Carol A. Quinn, Reg. No. 39,000

(Name of Attorney for Applicant)

Carol A. Quinn
Signature

March 2, 2005
Date of Signature